

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.  
**09/871,582**  
APPLICANT(S)

FILING DATE

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			/				51			/			
2			/				52			/			
3			/				53		/				
4			/				54		/				
5			/				55		/				
6			/				56		/				
7			/				57		/				
8			/				58		/				
9			/				59		/				
10			/				60		/				
11			/				61		/				
12			/				62		/				
13			/				63		/				
14			/				64		/				
15			/				65		/				
16			/				66		/				
17			/				67		/				
18			/				68		/				
19			/				69		/				
20			/				70		/				
21			/				71		/				
22			/				72		/				
23			/				73		/				
24			/				74		/				
25			/				75		/				
26			/				76		/				
27			/				77		/				
28			/				78		/				
29			/				79		/				
30			/				80		/				
31			/				81		/				
32			/				82		/				
33			/				83		/				
34			/				84		/				
35			/				85		/				
36			/				86		/				
37			/				87		/				
38			/				88		/				
39			/				89		/				
40			/				90		/				
41			/				91		/				
42			/				92		/				
43			/				93		/				
44			/				94		/				
45			/				95		/				
46			/				96		/				
47			/				97		/				
48			/				98		/				
49			/				99		/				
50			/				100		/				
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> <small>(FOR USE WITH FORM PTO-875)</small>							SERIAL NO.	FILING DATE					
							APPLICANT(S)						
CLAIMS													
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				*		*		*	
IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
101			/					51					
102			/					52					
103			/					53					
104			/					54					
105			/					55					
106			/					56					
107			/					57					
108			/					58					
109			/					59					
110			/					60					
111			/					61					
112			/					62					
113			/					63					
114			/					64					
115			/					65					
116			/					66					
117			/					67					
118			/					68					
119			/					69					
120			/					70					
121			/					71					
122			/					72					
123			/					73					
124			/					74					
125			/					75					
126			/					76					
127			/					77					
128			/					78					
129			/					79					
130			/					80					
131			/					81					
132			/					82					
133			/					83					
134			/					84					
135			/					85					
136			/					86					
137			/					87					
138			/					88					
139			/					89					
140			/					90					
141			/					91					
142			/					92					
143			/					93					
144			/					94					
145			/					95					
146			/					96					
147			/					97					
148			/					98					
149			/					99					
150								100					
TOTAL IND.		6						TOTAL IND.					
TOTAL DEP.		140						TOTAL DEP.					
TOTAL CLAIMS		146						TOTAL CLAIMS					